

IMPORTANCE OF CASE RECORDS.

This brings up the whole matter of case records and their vital importance. Too many physicians are very, very careless in the matter of keeping case records of their patients. Memory is a jade and an utterly unreliable one. Not one person in many thousands can accurately recall, from memory alone, any considerable number of the details of some most important incident that happened a year or so ago, and several people testifying to facts relating to such incidents will contradict each other most flatly, even when all have been equally mixed up in it or have been witnesses of or participants in the occurrence. On the other hand, case after case could be mentioned where the keeping of careful records that could be produced in court, where every essential detail relating to an illness or an operation was a matter of permanent record and not a matter dependent upon the faulty memory of the physician, has either discouraged the bringing of the suit or has made it a trifling matter to win it in court. At operations, such things should be noted as what assistants and nurses were present, what they variously did and if other physicians were witnesses to the operation. Whenever possible, every surgical procedure should be a matter of consultation and a record should be kept of that fact. You can never tell when the most unlikely appearing patient may turn around and sue you. One case is on record where the patient visited her physician at ten o'clock in the morning, thanked him profusely for his attention and paid his bill, and then deliberately walked down-town and filed a suit against him before noon of the same day! The importance of making and keeping an X-ray plate in all fracture cases has been frequently referred to in the JOURNAL and has been recognized by a rule of the Council endorsed by the House of Delegates. But that is only a fragment, though a most important one, of the record in the case. An excellent suggestion has been made in this connection, and it is well worth keeping in mind. When you make your X-ray plate, put two plates in the wrapper, film sides together, and then, if the patient demands the plate, as some of them do, and is quite peeved if you insist upon keeping it, you can give him one and still keep the other for your protection. Some men are doing this now, but it is a convenient thing for all to do and the expense is trifling. By all means think of your records; keep them sufficiently full; do not be careless and slovenly about this and so run the chance of being put to a good deal of trouble and expense—for if you are sued it will take a good deal of your time, and that is an expense to you—to say nothing about placing an added burden on all the members of the society just through your own fault. Keep your case records carefully.

"THE PASSING OF THE DETAIL MAN."

Several most pleasant gentlemen and worthy citizens have expressed a marked degree of pain because the JOURNAL published a little article with the above caption a month or two ago. A detail man is the representative of a manufacturing house and he goes about the country telling all the physicians he can come in contact with, what "the house" instructs him to say. Sometimes, when the house is a good one, he is able to tell the truth; many times he is not, and it must be somewhat unpleasant to him, for he must know it as well as anyone else. The evidence is not in the JOURNAL office now, but it was before the fire, to support the statement that not a single pharmaceutical manufacturing house in the United States welcomed the establishment of the Council on Pharmacy and Chemistry, because not a single one of them was free from the pernicious practice of foisting upon physicians preparations or mixtures or specialties that were not as claimed. And many of them are doing it yet. The Council asks of the manufacturer only the truth; many of them don't like the truth at all. Their big money comes, or used to come, from making the physician believe that what they said about their things was true, and this they did largely by means of the detail man, whereas and as a matter of fact, what they said about their stuff was mostly untrue. It has doubtless happened to many a physician, as it did to one a few years ago, that on a single day four detail men from four different houses called upon him and left four samples of what was supposedly the same thing, though each representative claimed that his house was the only one making the best preparation. How could they all be telling the truth? On the other hand, as an expression of a different opinion, here is a letter from the Co-operative Medical Advertising Bureau, an institution organized by the A. M. A., for the purpose of getting decent advertising in an honest way for the various state medical journals:

"We want to congratulate you on your sermonette entitled 'The Passing of the Detail Man'!

"This article ought to have the effect of making doctors consult the advertising pages of the California Journal to find out if the articles they want are advertised. We believe if the doctors in a state will, once for all, adopt the policy of asking about any articles they want to buy, 'Has it been approved? If so, why is it not advertised?' that the question of making advertising in the State Medical Journals pay will be solved.

"How far do you think the doctor can be advised to go when he is approached by the detail man? Should he be urged to say: 'I do not find your product advertised in my State Journal. If it has been approved and is in good standing with medical authorities, why is it not advertised in my State Journal?'

"Is it advisable and practicable for you to write another sermonette on the above subject for an early issue of your Journal? If you do, the Bureau wants to reprint them and use

both of these articles whenever it is soliciting business from any pharmaceutical house.

"As soon as the doctor will depend on his State Journal for information about the things he wants to buy, then it will not be possible to print the advertisements that will come to your publication. That is just the difficulty the A. M. A. Journal is having at this time. Furthermore, the advertisements bring the advertiser better returns."

THE HARRISON LAW; CONSCIENCE OR CUPIDITY?

A number of letters have come to the JOURNAL asking for information in regard to various points connected with the administration of the Harrison anti-narcotic law and the rights of physicians thereunder. Many physicians have, and practically every physician at some time or other has had under his care, a drug habitue. Many of these, for one reason or another, do not appear to be good subjects for an attempted cure or for the immediate withdrawal of the drug. That is a matter that is up to the conscience of the physician. The law permits him to prescribe these drugs, but he must put the name and address of the patient on the prescription and also his own name in full and the number of his Federal license. He may personally give a dose to a patient except in his office, without keeping any record. If, however, he gives any prescribed drug to a patient in his office or to be used when he is not present or to be given to the patient by some one else or to be taken subsequently by the patient, then he must keep a record of the name of the patient, the date, the drug and its amount, and this record he must keep for two years. The purpose of the law is not to interfere in any way with the honest practice of the professions affected by it, but to put a stop to the criminal trade in these habit-forming drugs. Cupidity, not conscience, should know fear.

MEDICAL COMMENT ON WAR VICTIMS.

A distinguished English physician, writing to a friend here in California, conveys some interesting facts in regard to conditions related to wounded soldiers. Of course there is much of the letter which is not exactly neutral in tone (!) and therefore is omitted. At the request of the recipient of the letter, all names of men and places are left out:

I have seen a good deal of the wounded soldiers—we have had 900 in the — Hospital where I am vice-chairman and to be chairman in March, and I am inspector of Red Cross Auxiliary Hospitals over the whole of —, which keeps me motoring all about the country. A very large number of beds—about 700—have been equipped by private persons, mostly only 8 or 12 in one place, so it is a big job. We get relief by drafting out from the — Hospital our slight and semi-convalescent patients so as to have our beds free for the more serious cases. We have erected

marquees and a long wooden building in the hospital grounds which give us about 140 extra beds, and we also use three wards for soldiers. They almost all arrive septic, but the sepsis as a rule is not of a bad type. Though there are some cases of tetanus and of gangrene, I have never seen wounds so foul producing so little constitutional disturbance. But the sepsis is very capable of causing secondary hemorrhage. Never was a war conducted with such brutality since the early middle ages. The Belgians, of whom I have seen a few, seem very nice fellows, very courteous and very patient. We offered to take some Belgian refugees into our house, but being near the coast this is a prohibited area for aliens so we have not had any.

NEW AND NON-OFFICIAL REMEDIES, 1915.

The 1915 edition of this exceedingly valuable book issued by the Council on Pharmacy and Chemistry of the A. M. A., 535 North Dearborn street, Chicago, has been issued and is much enlarged and by so much, more useful. It may be fairly said to contain descriptions of all the worthwhile proprietary and nonofficial remedies now on the market in the United States and it is the only book which contains comprehensive and trustworthy discussions of the composition, source, properties and dosages of proprietary remedies. Paper bound copies cost 50 cents and cloth bound \$1.00, and they may be had from the A. M. A. at the address already given. In addition to the individual descriptions of drugs and preparations, the book contains critical discussions of the various classes of preparations. These general discussions compare the value of the newer remedies with the established drugs which they are designed to displace. Thus the book affords an authoritative review of therapeutic progress.

The book contains, as a supplement, a list of references to discussions of articles not admitted to New and Nonofficial Remedies which have appeared in *The Journal of the American Medical Association*, in the Annual Reports of the Council on Pharmacy and Chemistry and in the Reports of the A. M. A. Chemical Laboratory. This list of references enables physicians readily to obtain information in regard to the many nostrums which are exploited to the medical profession.

SUMMER GRADUATE MEDICAL COURSE.

The second of the summer graduate medical courses inaugurated by Stanford University Medical School has been outlined for the present year. The session will extend for six weeks from July 6th to August 14th and all the classes will be in San Francisco. The courses are quite comprehensive in their scope and as some of them are limited in the number of students that will be accepted, those who are considering the matter should correspond early with the Dean, Stanford University Medical School, Sacramento and Webster streets, San Francisco, Calif.